



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**Applicants:** Annette Kim

**Serial No.:** 10/510,609

**Case No.:** 21076YP

**Art Unit:**  
1625

**Filed:** October 08, 2004

**For:** TYROSINE KINASE INHIBITORS

**Examiner:**  
R.J. Desai

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT**

Sir:

This is in response to the Official Action dated December 12, 2006 for which a response is due by March 12, 2007. Please consider the remarks below.

CERTIFICATE OF MAILING

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VIRGINIA 22313-1450, ON THE DATE APPEARING BELOW.

MERCK & CO., INC

MAILED BY Barbara Muller DATE 3-12-07



PATENT  
CASE NO. 21076YP

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: ANNETTE KIM

Serial No. 10/510,609

Filed October 8, 2004

Group Art Unit 1625

Examiner R.J. Desai

For: TYROSINE KINASE INHIBITORS

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

☐ The fee has been calculated as shown below.

CLAIMS AS AMENDED

(1)	(2) Claims remaining after amendment	(3)	(4) Highest Number Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims	* <u>5</u>	-	** <u>21</u> =	<u>0</u> X	\$50	= <u>0.00</u>
Independent Claims	* <u>2</u>	-	*** <u>3</u> =	<u>0</u> X	\$200	= <u>0.00</u>
Multiple Dependent Claims					\$360 ****	= <u>        </u>
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						0.00

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space.

\*\*\*\* Add this fee only if application is amended to include multiple dependent claims (regardless of number) and no multiple dependent claims were originally filed.

Charge \$ 0.00 to Deposit Account No. 13-2755. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2755. A duplicate copy of this sheet is enclosed.

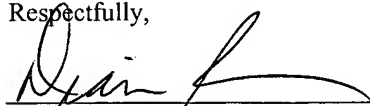
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:  
Commissioner for Patents, P.O. Box 1450,  
Alexandria, Virginia 22313-1450, on the date  
appearing below.

Merck & Co., Inc.

By: Barbara Mueller Date: 3-12-07

IN DUPLICATE

Respectfully,



By: Dianne Brown

Attorney for Applicant(s)

Reg. No. 42,068

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Date: March 12, 2007